

EXCISION OF TUBERCULOUS MASS FROM LIVER.

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THE patient, Mrs. G., aged forty-two years, has never been seriously ill, but has been bilious all her life. Her father was strong and hardy, her mother suffered from some obscure liver trouble.

About the middle of August, 1902, she was suddenly taken with a severe pain in the right lumbar region, lasting about twenty-four hours. Since then her side has been painful. She experienced a difficulty in breathing, which difficulty increased until the breathing became very shallow on that side. She favored the right side, because there seemed to be a pulling pain, and she could neither sleep nor rest on that side.

In November following I was called to see her. I found her supporting her right side with hand placed over sore spot. When walking, she would bend somewhat to the right and stoop forward. Bimanual pelvic examination revealed nothing abnormal.

Abdominal palpation elicited an enlargement at a point midway between the cartilage of the tenth rib and the crest of the ilium, that is, in the centre of the right lumbar section anteriorly.

The enlargement was sensitive. I could not detect fluctuation. It was decided to try medicinal treatment for a month. At the end of this time her condition was no better, and she decided to be operated for the relief of her trouble.

On December 4 she entered the hospital, and on the following morning she was operated. An incision was made over the site of the tumor parallel to the outer fibres of the rectus muscle. Through this incision the appendix was located, and its chronic inflammatory condition called for its removal.

The gall-bladder was found contracted and retracted; no calculi could be detected. Directing search by the aid of the sense of touch along the edge of the liver, it was found that two and one-half inches of intestine were adhered to the liver. After separating the adhesions and freeing the bowel, further

exploration revealed a tumor in the lower right lobe of the liver. The surface of the liver corresponding to the tumor was firmly adhered to the parietal peritoneum. After freeing these adhesions, it was apparent that the section in which the tumor was situated could be removed in the shape of a wedge or triangle. This was mentally outlined, and heavy catgut sutures were introduced, beginning at the apex of the triangle and passed through the thickness of the lobe; the needle was reinserted and brought out opposite the first free end and left untied.

Sutures were introduced in this manner half an inch apart and half an inch from the margin of the triangle. After inserting a sufficient number of sutures, the wedge containing the growth was cut away with scissors, and the cut surfaces of the liver immediately brought together and the sutures tied. Approximating the surfaces in this way promptly checked the hæmorrhage. The size of the tumor removed was that of a goose-egg.

The abdominal incision was closed without drainage. There was some oozing of serum at the lower angle of the wound on the fourth day. The incision healed kindly and firmly, and the patient left the hospital in four weeks. She reports every month, and always with the same happy remark: "I am feeling better and stronger than I have for ten years." The difficulty in breathing disappeared almost immediately after the operation. She can now breathe deeply without any pain or discomfort. Slides were mounted by Drs. Westbrook and Ulrich and a diagnosis of tubercle made. The surface and substance of the liver were smooth and no nodules could be detected.

Dr. Keen, in the *ANNALS OF SURGERY*, gives a summary of the surgical conditions of the liver, and mentions the following tumors: Herniated left lobe, five cases; syphiloma, twelve cases; carcinoma, seventeen cases; angiofibroma, one case; cavernoma, one case; endothelioma, one case; angioma, four cases; adenoma, seven cases; sarcoma, five cases; cystoma, one case; small calculi, one case; hydatid cysts, twenty cases.

The case I have just reported adds another tumor to the above list, and for that reason alone I deem it worth while recording.